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Chapter 21 Borders and Healthcare: Medical Mobility, Globalization and Borderlands Tourism

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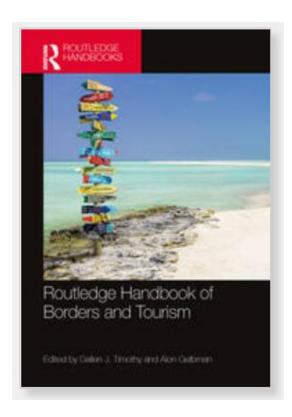
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Part 4: The Competitive Advantage of the Border

Chapter 20 Outshopping Abroad: Cross-border Shopping Tourism and the Competitive Advantage of Borders

Teemu Makkonen

Chapter 21 Borders and Healthcare: Medical Mobility, Globalization and Borderlands Tourism

Tomás Cuevas Contreras and Isabel Zizaldra Hernández

Chapter 22 Crossing Borders and Border Crossings: Sex, Tourism and Travelling in the Sensual Spaces of Borderlands

C. Michael Hall and Kimberley J. Wood

Chapter 23 Transboundary Second-home Tourism

Olga Hannonen

Chapter 24 Merchants, Smugglers and Wanglers: Non-conventional Tourism and Trade across Political borders

21 BORDERS AND HEALTHCARE

Medical Mobility, Globalization and Borderland Tourism

Tomás Cuevas Contreras and Isabel Zizaldra Hernández

Introduction

At first glance, the crossover between tourism and the practice of medicine seems to be an incongruous fit, perhaps even contradictory or oxymoronic. This is largely owing to the common misunderstanding that "tourism is a frivolous pursuit: fun, sometimes educational in the lightest sense, often romantic, even exotic" (Becker, 2013, p. 8), whereas in fact this describes only a part of the global tourism phenomenon, which entails traveling away from home for any reason, and a tourist is essentially anyone who travels away from home for at least one night regardless of motivations and activities undertaken in the destination. Likewise, same-day return trips (excursions) and the activities undertaken are part of the tourism system (World Tourism Organization, 2021). Healthcare, thus, may be as strong a motivation for travel (and tourism) as lounging on a beach, touring an historic city or visiting friends and family.

Healthcare is a high priority for the general population and for most governments and has received considerable policy attention in recent years. For millennia, the need for medical treatments has led many of the world's affluent citizenry to seek healthcare beyond the borders of their home regions or countries. The ancient Greeks, Romans and Sumerians notoriously traveled for spiritual healing, thermal spa treatments and medical care to areas inside and outside their respective empires. Likewise, Indigenous people throughout history have long embarked on quests to heal or strengthen themselves. These are two manifestations of the antecedents to modern medical tourism, also variously known as health tourism, surgery tourism, healthcare tourism, reproductive tourism, dental tourism, pharmaceutical tourism, medical mobility